

Home Study

Note: You must have an assignment to the provider record to create a Home Study.

Note: Information related to applicants is entered on a number of pages, including the Home Provider, Person Management, Home Study, and Psychosocial Evaluation Report.

1. From your desktop, go to the Provider tab and click the Create Provider Work hyperlink [Create provider work](#) or select Create Provider Work from the Actions drop-down next to the specific provider to open the Create Provider Work page.

eWiSACWIS

Actions Financial State Security Refresh Search Caitlin M.

Home Cases (426) Providers (193) Workers (64) Approvals (1107) Access Reports (121) JCPC Referrals (3) Home In

Providers

Filter by: Providers: 193

☐ Date restricted

☒ Not approved/cancelled

☒ Multiselect

[Create provider work](#) [Create private provider](#)

Search

2. Select Home Study from the License drop-down, select the provider name in the Providers group box, and click the Create button.

Create Provider Work - Internet Explorer

eWiSACWIS

Print Help

Create Provider Items

Administrative

Check

Imaging

License

Maintenance

Narrative

Payment

Support Plans

Unlicensed Complaint

Adoptive Home Assessment Results

Adoption Home Study Approval Letter

Adopt Home Study Aprvl Ltr for Specific Child

Facility License

Foster Family Assessment

Guardian Family Assessment

Home Study

Home Study Update/Recertification

Licensing Activity

Re-License

Providers

Badger, Bucky (9221596)

Captain, Stewart (9221055)

Farmer, Sally (9221682)

Gum, Bubble (9221683)

Muffin, Blueberry (9221684)

Provider, Female (9221778)

Provider, Foster (9221772)

Provider, Home (9221845)

Provider, Mother (9221781)

State, Neighbor (9221779)

Test, Sally (9221062)

Create Close

3. If a Home Study already exists, you will be presented with the Home Study Creation page. On the Home Study Creation page, either select the [Copy](#) link next to the home study you would like to copy, or select the Create button to create a new home study not copying any information from a previous home study.

Home Study Creation - Windows Internet Explorer

eWiSACWIS Print Spell Check Help

Please select a Home Study to copy from, if appropriate

Existing Home Studies

Study Date ▼	Status	Placement Type	Licensing Agency	
10/10/2014	Approved for Foster Care	Child Specific Placement	BMCW - CSSW	Copy

Create Close

100%

4. The Home Study page is used to document information gathered and to evaluate the status of the family. The Basic group box includes general information items relevant to the applicant(s). If the provider is licensed or has a pending license, the license type, licensing agency, and certification level will pre-fill from the Licensing page. Select the home study type, update the home study date (if applicable), and select the placement type. Once you have completed the home study, you will update the home study status.

Note: For all home study types except “Adoptive,” up to four applicants will appear.

The Applicant(s) Information tab contains information pertaining to the applicant(s): demographics, marital/domestic partnerships/civil unions, and motivation for becoming an adoptive and/or foster parent(s). In the Applicant Information group box, the majority of the applicant(s)’s information pre-fills from the applicant’s Person Management page. Enter the weight, height, hair, eye color, occupation, employer, and source of additional income for each applicant. Select a value from the Education and Gross Annual Income fields.

Note: To update the applicant information that pre-fills from the Person Management page, click on the name of the applicant (blue link) to open the applicant’s Person Management page.

Home Study - Windows Internet Explorer

eWiSACWIS

TM Print Spell Check ABC Help ?

Basic

Applicant(s): [Badger, Bucky \(9225066\)](#) [Badger, Momma \(9226818\)](#) Provider: [Badger, Bucky \(9221596\)](#)

[Badger, Grandma \(9226819\)](#)

Lcns. Type: BMCW Lcns. Agency: BMCW - CSSW Certification: Level 2

Home Study Type: Foster Care Home Study Date: 10/10/2014 Placement Type: Child Specific Placement

Home Study Status: Pending [View/Update Hold History](#)

Applicant(s) Information Family Medical/ School Reports Background Information Home/Community/ Family Lifestyle Results

Applicant Information

Applicant 1: [Bucky Badger](#) Applicant 2: [Momma Badger](#)

AKA Name(s): AKA Name(s): Bear, Momma (Maiden Name)

Date of Birth: 04/12/1970 Date of Birth: 10/17/1971

Birthplace: Madison, WI Birthplace: Milwaukee, WI

Race(s): Asian Race(s): White

Gender: Female Gender: Female

Religion: Catholic Religion: Seventh Day Adventist

Indian Ancestry: Indian Ancestry:

Tribe: Tribe:

Language(s): English Language(s): English

Weight: Height: Weight: Height:

Hair: Eye Color: Hair: Eye Color:

Occupation: Occupation:

Education: Education:

Employer: Employer:

Gross Annual Income: Gross Annual Income:

Sources of Additional Income: Sources of Additional Income:

Options: Go Save Close

100%

In the Marital/Domestic Partner/Civil Union Information group box, enter the Date of Current Marriage/Domestic Partnership/Civil Union. If not applicable, select the N/A checkbox. In the Past Marriage(s)/Domestic Partnership(s)/Civil Union(s) section, enter the name of the past spouse/partner and the begin and end dates. If not applicable, select the N/A checkbox.

Marital/Domestic Partnerships/Civil Unions

Date of Current Marriage/Domestic Partnership/Civil Union: ☐ N/A

Bucky Badger's Past Marriage(s)/Domestic Partnership(s)/Civil Union(s): ☐ N/A

Name of Past Spouse/Partner:

Date Begun:

Date Ended:

[Delete](#)

Momma Badger's Past Marriage(s)/Domestic Partnership(s)/Civil Union(s): ☐ N/A

Name of Past Spouse/Partner:

Date Begun:

Date Ended:

[Delete](#)

If the Placement Type of “Future Placement” was selected in the Basic group box at the top of the page, enter applicable information in the Applicant Disposition and Motivation group boxes.

Applicant Disposition

The Applicant(s) applied to become a(n) Foster Care placement of between the ages of

The Applicant(s) open to placement of a sibling group. If open to a sibling group, how many?

Motivation

Indicate the Applicant(s)'s stated reasons for wanting to become a foster parent or adoptive family.

[More...](#) [Less...](#) [Default](#)

Indicate whether or not the Applicant(s) has/have any adoption or foster care experience and the response of each adult member of the household as to whether he/she has ever been rejected or deferred as a prospective adoptive parent or foster parent or has been the subject of an unfavorable home study with any licensing agency.

[More...](#) [Less...](#) [Default](#)

If the Placement Type of “Child Specific Placement” was selected in the Basic group box at the top of the page, the Child Specific Placement will display on this tab. To search out and retrieve the child(ren) who will be placed at this home, click the Insert button.

Child Specific Placement

Name	DOB	Gender	
<div>Insert</div>			

Please keep in mind that any information written in this section is confidential and must be redacted should the home study be shared with a third party.

Once all children have been inserted, complete the narrative boxes for each child.

Child Specific Placement

Name	DOB	Gender	
Ghost Casper (9226099)	11/01/2006	Male	Delete

Insert

Please keep in mind that any information written in this section is confidential and must be redacted should the home study be shared with a third party.

Provide family circumstances and legal situation of the child being considered.

Name: Ghost Casper, 11/01/2006, Male

[More...](#) [Less...](#) [Default](#)

Physically describe the child/youth involved in the home study: name, gender, age, date of birth, height, weight, eye, and hair color.

Name: Ghost Casper, 11/01/2006, Male

[More...](#) [Less...](#) [Default](#)

If the child/youth is currently in the home, discuss his or her adjustment since placement. If not currently placed with the Applicant(s), discuss the nature and character of the Applicant(s)'s relationship(s) with the child or youth.

Name: Ghost Casper, 11/01/2006, Male

[More...](#) [Less...](#) [Default](#)

Describe the strengths, personality, interests, emotional/physical development, and medical history of the child or youth being considered.

Name: Ghost Casper, 11/01/2006, Male

5. The Family tab contains the sons and daughters of the applicant(s), others residing or frequently in the home, and extended family members. The first group box is the Sons and Daughters of Applicant(s). The sons and daughters pre-fill from the Home Provider page if they have been documented as members. You can select the Insert button to add additional people to the home study. The Receiving Care radio button will automatically be set to “Yes” when the child is under the age of 18. If the son/daughter is living out of the home, indicate where. It is important to verify that the son or daughter’s age is identified, as this will determine what questions to answer for them on the Psychosocial Evaluation Report.

Note: Clicking the Insert button and adding sons and daughters will not add these individuals to the Members tab of the Home Provider page.

Note: If the foster parents have adopted a child, a new person record needs to be created for the adoptive child. That record can be created via the Members tab of the Home Provider page.

The Others Residing or Frequently in the Home group box displays others who have been previously entered on the Members tab of the Home Provider page. If the individual should not be included, click the N/A checkbox. You can select the Insert button to add additional people to the home study. The Receiving Care radio button will automatically be set to “Yes” when the person is under the age of 18. It is important to verify that the person’s age is identified, as this will determine what questions to answer for them on the Psychosocial Evaluation Report.

Note: Clicking the Insert button and adding others residing or frequently in the home will not add these individuals to the Members tab of the Home Provider page.

Home Study - Windows Internet Explorer

eWiSACWIS TM Print Spell Check ABC Help ?

Basic

Applicant(s): [Badger, Bucky \(9225066\)](#) [Badger, Momma \(9226818\)](#) Provider: [Badger, Bucky \(9221596\)](#)
[Badger, Grandma \(9226819\)](#)

Lcns. Type: BMCW Lcns. Agency: BMCW - CSSW Certification: Level 2

Home Study Type: Foster Care Home Study Date: 10/10/2014 Placement Type: Child Specific Placement

Home Study Status: Pending [View/Update Hold History](#)

Family

Sons and Daughters of Applicant(s)

Name	DOB	Age	DOD	Receiving Care	Location and Living Situation
Son Badger (9226821)	03/09/1995	19	00/00/0000	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> In Home <input checked="" type="radio"/> Out of Home
	00/00/0000		00/00/0000	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> In Home <input type="radio"/> Out of Home

[Delete](#) [Insert](#)

Others Residing or Frequently in the Home

Foster children placed in the home or children placed in the pre-adoptive home are not included here. The definition of adults frequently in the home is any adult who is in the home on a regular basis and has substantial contact with children placed in the home or any adult who, while in the home, would have access to be alone with children placed in the home.

Name	DOB	Age	Relationship	Current Situation	Receiving Care	N/A
Nephew Badger (9226822)	03/04/1986	28	Nephew		<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="checkbox"/>
	00/00/0000				<input type="radio"/> Yes <input type="radio"/> No	

[Delete](#) [Insert](#)

Options: [Go](#) [Save](#) [Close](#)

100%

The last group box is the Extended Family Members. A separate group box will appear for each applicant. This group box allows you to add the additional extended family member's name, location, date of birth, age, date of death, relationship, frequency of contact, and if the extended family member is a source of a supportive relationship.

Note: Clicking the Insert button and adding extended family members will not add these individuals to the Members tab of the Home Provider page.

Extended Family Members: Bucky Badger
Include Applicant's birth parents, adoptive parents, step parents, siblings, and other prominent extended family members (living or deceased).

Name and Location	DOB	Age	DOD	Relationship	Frequency of Contact	Source of Supportive Relationship	
<div><div></div><div>Location: <div></div></div></div>	<div>00/00/0000</div>	<div></div>	<div>00/00/0000</div>	<div></div>	<div></div>	<div><input type="radio"/> Yes <input type="radio"/> No</div>	<div>Delete</div>

Insert

6. The Medical/School Reports tab contains the medical report for all that are included in home study, as well as the school reports for everyone (but not the applicants). The Medical Reports group box has a row shown for applicant 1, followed by a row for applicant 2 (if applicable), followed by a row for each of the sons and daughters who have the In Home radio button selected and each of the others residing or frequently in the home. Enter data in the Completed By and Completion Date fields.

The School Reports group box displays a row for each of the sons and daughters who have the In Home radio button selected and each of the others residing or frequently in the home. Enter data in the Completed By and Received On fields. Next to each line, there is a N/A checkbox. If the school report is not applicable, select the N/A checkbox.

Home Study - Windows Internet Explorer

eWiSACWIS TM Print Spell Check REC Help ?

Basic

Applicant(s): [Badger, Bucky \(9225066\)](#) [Badger, Momma \(9226818\)](#) Provider: [Badger, Bucky \(9221596\)](#)
[Badger, Grandma \(9226819\)](#)

Lcns. Type: BMCW Lcns. Agency: BMCW - CSSW Certification: Level 2

Home Study Type: Foster Care Home Study Date: 10/10/2014 Placement Type: Child Specific Placement

Home Study Status: Pending [View/Update Hold History](#)

Applicant(s) Information	Family	Medical/ School Reports	Background Information	Home/Community/ Family Lifestyle	Results
Medical Reports					
Name	Completed By	Completion Date	N/A		
Bucky Badger		00/00/0000	<input type="checkbox"/>		
Momma Badger		00/00/0000	<input type="checkbox"/>		
Baby Badger		00/00/0000	<input type="checkbox"/>		
Daughter Badger		00/00/0000	<input type="checkbox"/>		
Grandma Badger		00/00/0000	<input type="checkbox"/>		
Nephew Badger		00/00/0000	<input type="checkbox"/>		
School Reports					
Name	Completed By	Received On	N/A		
Baby Badger		00/00/0000	<input checked="" type="checkbox"/>		
Daughter Badger		00/00/0000	<input type="checkbox"/>		
Grandma Badger		00/00/0000	<input checked="" type="checkbox"/>		
Nephew Badger		00/00/0000	<input checked="" type="checkbox"/>		

Options: Go Save Close

100%

7. The Background Information tab contains the face-to-face contacts, references, and criminal/CPS background checks. The Face-to-Face Contacts group box is used to record the date of the contact, length of the interview, person(s) interviewed, and location. Click the Insert button to add additional contacts.

The References (see program guidelines) group box allows you to document reference used for the home study. You can document the name of the reference, relationship to applicant as well as the date the reference was received. Click the Insert button to add additional references.

The screenshot displays the eWiSACWIS web application within a Windows Internet Explorer browser window. The application has a purple header bar with the logo and navigation icons. The main content area is divided into several sections.

Basic Information Section:

- Applicant(s):** [Badger, Bucky \(9225066\)](#), [Badger, Momma \(9226818\)](#), [Badger, Grandma \(9226819\)](#)
- Provider:** [Badger, Bucky \(9221596\)](#)
- Lcns. Type:** BMCW (dropdown)
- Lcns. Agency:** BMCW - CSSW
- Certification:** Level 2 (dropdown)
- Home Study Type:** Foster Care (dropdown)
- Home Study Date:** 10/10/2014
- Placement Type:** Child Specific Placement (dropdown)
- Home Study Status:** Pending (dropdown)
- [View/Update Hold History](#)

Navigation Tabs: Applicant(s) Information, Family, Medical/School Reports, **Background Information**, Home/Community/Family Lifestyle, Results.

Face-to-Face Contacts Section:

Date	Length	Person(s) Interviewed	Location	
00/00/0000	00:00			Delete

[Insert](#)

References (see program guidelines) Section:

Name	Relationship to Applicant(s)	Received On	
		00/00/0000	Delete

[Insert](#)

Footer:

Options: [dropdown] [Go](#) [Save](#) [Close](#)

100%

A background check must be completed for all applicants as well as for anyone residing in the home. The Criminal/CPS Background Checks (see program guidelines) group box allows you to document the background checks and findings. Document the date and findings for the sex offender address check. If findings are identified for an individual in the home, address them in the History portion of the Psychosocial Evaluation Report for that individual. Document the type, date, and findings of all other background checks for each individual. If County/Sheriff, Local, or Out of State is chosen, enter a brief description for the location (indicate the county, city, or state). If the background checks are not applicable for an individual, select the N/A checkbox next to the person's name.

Note: The Adam Walsh/FBI type of background check contains “Completed” or “Not Completed” values in the Findings drop-down. All other types of background checks contain either a “Findings – see below” or “No Findings.”

Criminal/CPS Background Checks (see program guidelines)

The required criminal record and child abuse/neglect checks (including all the States the Applicant(s) or other adults living in the home have resided in for the past 5 years) were completed for Bucky Badger, Momma Badger, Grandma Badger along with any adult(s) living in the Applicant(s)'s home. The determination of whether an offense or finding is substantially related to caring for children in foster care, from the results found in the checks listed below, as required under Ch. DHS 12.06 is elaborated on in the section below.

Type	Date	Findings
Sex Offender Address Check	00/00/0000	<input type="button" value="v"/>

Bucky Badger ☐ N/A



Type	Date	Findings	Description	
Adam Walsh/FBI <input type="button" value="v"/>	00/00/0000	<input type="button" value="v"/> Completed Not Completed		Delete

Momma Badger ☐ N/A

Type	Date	Findings	Description	
County/Sheriff <input type="button" value="v"/>	00/00/0000	<input type="button" value="v"/> Findings-see below No findings	Milwaukee County Sheriff's Department	Delete

If “Findings – see below” was selected for any individual, enter data in the individual’s additional narrative fields.

Momma Badger ☐ N/A

Type	Date	Findings	Description	
County/Sheriff 	10/10/2014	Findings-see below 	Milwaukee County Sheriff's Department	Delete

Insert

With results or findings, you must discuss those results or findings under the history section of the Psychosocial Evaluation Report. Be sure to discuss the results or findings that warranted a Desk Guide Rating of 3, 4, or 5 and all mitigation that reduces the Final Desk Guide Rating. List any results from all of the background checks completed. If there were no results or findings, provide that indication.

[More...](#) [Less...](#) [Default](#)

Provide a determination of whether the offense(s) or finding(s) substantially relate to caring for children as required under Ch. DHS 12.06. Remember to include information about fostering, the offense, and the person (see Ch. DHS 12.06 for an explanation of the required information).

[More...](#) [Less...](#) [Default](#)

8. The Home/Community/Family Lifestyle tab allows you to record information about the residence and family lifestyle. In the Home and Community group box, document the type of residence, square footage, number of bedrooms, number of bathrooms, and length of stay at current residence, as well as the general narrative description questions.

For each applicant, enter narrative in the Profile group box.

Enter information in each of the narrative fields in the Family Lifestyle group box, including the Childcare and Privacy sections.

Finally, select a value from the drop-down in the Legal group box.

Home Study - Windows Internet Explorer

eWiSACWIS TM Print Spell Check Help

Basic

Applicant(s): [Badger, Bucky \(9225066\)](#) [Badger, Momma \(9226818\)](#) [Badger, Grandma \(9226819\)](#) Provider: [Badger, Bucky \(9221596\)](#)

Lcns. Type: Lcns. Agency: Certification:

Home Study Type: Home Study Date: Placement Type:

Home Study Status: [View/Update Hold History](#)

Applicant(s) Information **Family** **Medical/School Reports** **Background Information** **Home/Community/Family Lifestyle** **Results**

Home and Community

Type of Residence: Square Footage:

Number of Bedrooms: Number of Bathrooms:

Length of time in current residence:

Describe the home and community so that a reader can picture the home and surrounding community. This should be a strength-based description pointing out what makes the home unique to the Applicant(s) (special decorations, color schemes, projects, etc.).

[More...](#) [Less...](#) [Default](#)

Describe the neighborhood as well as the community surrounding the residence and focus on resources in the area: hospitals/specialized medical providers, schools, special education programs, places of worship, mental health services, etc.

[More...](#) [Less...](#) [Default](#)

Bucky Badger Profile

Describe how the Applicant presents himself/herself - assured, hesitant, physically active, sedate, thoughtful, etc. Briefly describe any special interests, hobbies, expertise, or talents the Applicant possesses. Also, describe what the Applicant shared regarding his/her aspirations and goals in life. You may also include something his/her spouse/partner has said about him/her that describes his/her personality.

Options:

100%

9. The Results tab contains all inventory items related to Psychosocial Evaluation Report (completed in the next step), as well as a Psychosocial Evaluation Conclusion, Placement Considerations, and Recommendations based on the home study. Record the answer for each applicant (when applicable) using a rating in the drop-down. The values default to a '2' rating. Once you have completed all of the tabs on the Home Study page, as well as the associated Psychosocial Evaluation Report page, you will return to the Results tab to complete the home study. See step 20 on page 22.
10. From the Options drop-down (on any tab of the Home Study page), select Psychosocial Evaluation Report and click Go. This will open the Psychosocial Evaluation Report page.

Home Study - Windows Internet Explorer

eWiSACWIS TM Print Spell Check ABC Help ?

Basic

Applicant(s): [Badger, Bucky \(9225066\)](#) [Badger, Momma \(9226818\)](#) [Badger, Grandma \(9226819\)](#) Provider: [Badger, Bucky \(9221596\)](#)

Lcns. Type: Lcns. Agency: Certification:

Home Study Type: Home Study Date: Placement Type:

Home Study Status: [View/Update Hold History](#)

Applicant(s) Information	Family	Medical/School Reports	Background Information	Home/Community/Family Lifestyle	Results
History					
Bucky Badger	Momma Badger	Grandma Badger			
<input type="text" value="2"/>	<input type="text" value="2"/>	<input type="text" value="2"/>	Childhood Family Adaptability		
<input type="text" value="2"/>	<input type="text" value="2"/>	<input type="text" value="2"/>	Childhood Family Cohesion		
<input type="text" value="2"/>	<input type="text" value="2"/>	<input type="text" value="2"/>	Childhood History of Deprivation/Trauma		
<input type="text" value="2"/>	<input type="text" value="2"/>	<input type="text" value="2"/>	Childhood History of Victimization		
<input type="text" value="2"/>	<input type="text" value="2"/>	<input type="text" value="2"/>	Adult History of Victimization/Trauma		
<input type="text" value="2"/>	<input type="text" value="2"/>	<input type="text" value="2"/>	History of Child Abuse/Neglect		
<input type="text" value="2"/>	<input type="text" value="2"/>	<input type="text" value="2"/>	History of Alcohol/Drug Abuse		
<input type="text" value="2"/>	<input type="text" value="2"/>	<input type="text" value="2"/>	Crime/Arrest/Allegations/Violence		
<input type="text" value="2"/>	<input type="text" value="2"/>	<input type="text" value="2"/>	Psychiatric History		
<input type="text" value="2"/>	<input type="text" value="2"/>	<input type="text" value="2"/>	Occupational History		
<input type="text" value="2"/>	<input type="text" value="2"/>	<input type="text" value="2"/>	Marriage/Domestic Partner/Civil Union History		

Options:

100%

11. On the Psychosocial Evaluation Report page, there are 8 tabs: History, Personal Characteristics, Marital/Domestic Partner/Civil Union, Sons/Daughters/Others, Extended Family, Physical/Social Environment, Parenting, and Adoption/Foster Care. On the History tab, enter text in each of the narrative fields for each applicant. Click on the [Follow Evaluation Instructions](#) link to open the associated Psychosocial Narration Instructions.

Psychosocial Evaluation Report -- Webpage Dialog

eWiSACWIS Print Spell Check Help

Basic

Applicant(s): [Badger, Bucky \(9225066\)](#) [Badger, Momma \(9226818\)](#) Provider: [Badger, Bucky \(9221596\)](#)

[Badger, Grandma \(9226819\)](#) ☐ Completed

History	Personal Characteristics	Marital/Domestic Partner/Civil Union	Sons/Daughters/Others	Extended Family	Physical/Social Environment	Parenting	Adoption/Foster Care
---------	--------------------------	--------------------------------------	-----------------------	-----------------	-----------------------------	-----------	----------------------

History - Bucky Badger

Provide a one paragraph narrative describing the Applicant's history: where and when he/she was born, who he/she was born to, siblings, schooling, marriages, civil unions, domestic partnerships, deaths, divorces, etc. Do not include issues you have identified in the Psychosocial Inventory with Desk Guide Ratings. This is a factual description of the Applicant's History.

[More...](#) [Less...](#) [Default](#)

[Follow Evaluation Instructions](#)

[More...](#) [Less...](#) [Default](#)

For every arrest or conviction please clearly discuss the offense and how it does or could affect the Applicant's current functioning and/or ability to parent. Use the same criteria in the Evaluation Instructions and determine whether you are going to sustain, reduce or mitigate the offense.

[More...](#) [Less...](#) [Default](#)

History - Momma Badger

Provide a one paragraph narrative describing the Applicant's history: where and when he/she was born, who he/she was born to, siblings, schooling, marriages, civil unions, domestic partnerships, deaths, divorces, etc. Do not include issues you have identified in the Psychosocial Inventory with Desk Guide Ratings. This is a factual description of the Applicant's History.

[More...](#) [Less...](#) [Default](#)

[Follow Evaluation Instructions](#)

[More...](#) [Less...](#) [Default](#)

For every arrest or conviction please clearly discuss the offense and how it does or could affect the Applicant's current functioning and/or ability to parent. Use the same criteria in the Evaluation Instructions and determine whether you are going to sustain, reduce or mitigate the offense.

[Save](#) [Close](#)

12. On the Personal Characteristics tab, enter text in each of the narrative fields for each applicant. Click on the [Follow Evaluation Instructions](#) link to open the associated Psychosocial Narration Instructions.

Psychosocial Evaluation Report -- Webpage Dialog

eWiSACWIS Print Spell Check Help

Basic

Applicant(s): [Badger, Bucky \(9225066\)](#) [Badger, Momma \(9226818\)](#) Provider: [Badger, Bucky \(9221596\)](#)

[Badger, Grandma \(9226819\)](#) ☐ Completed

History **Personal Characteristics** Marital/Domestic Partner/Civil Union Sons/Daughters/Others Extended Family Physical/Social Environment Parenting Adoption/Foster Care

Personal Characteristics - Bucky Badger

[Follow Evaluation Instructions](#)

[More...](#) [Less...](#) [Default](#)

If Applicant is taking any medications (prescribed or over-the-counter), please list and indicate the medical reasons for which they are being taken.

[More...](#) [Less...](#) [Default](#)

Personal Characteristics - Momma Badger

[Follow Evaluation Instructions](#)

[More...](#) [Less...](#) [Default](#)

If Applicant is taking any medications (prescribed or over-the-counter), please list and indicate the medical reasons for which they are being taken.

[More...](#) [Less...](#) [Default](#)

Personal Characteristics - Grandma Badger

[Follow Evaluation Instructions](#)

[More...](#) [Less...](#) [Default](#)

If Applicant is taking any medications (prescribed or over-the-counter), please list and indicate the medical reasons for which they are being taken.

[Save](#) [Close](#)

13. On the Marital/Domestic Partner/Civil Union tab, enter text in each of the narrative fields. Click on the [Follow Evaluation Instructions](#) link to open the associated Psychosocial Narration Instructions.

Psychosocial Evaluation Report -- Webpage Dialog

eWiSACWIS Print Spell Check Help

Basic

Applicant(s): [Badger, Bucky \(9225066\)](#) [Badger, Momma \(9226818\)](#) [Badger, Grandma \(9226819\)](#) Provider: [Badger, Bucky \(9221596\)](#)

☐ Completed

History	Personal Characteristics	Marital/Domestic Partner/Civil Union	Sons/Daughters/Others	Extended Family	Physical/Social Environment	Parenting	Adoption/Foster Care
---------	--------------------------	---	-----------------------	-----------------	-----------------------------	-----------	----------------------

Marital/Domestic Partner/Civil Union Relationship

[Follow Evaluation Instructions](#)

More... Less... Default

Provide a brief description of the Applicant(s)'s Marriage/Domestic Partnership/Civil Union highlighting their roles in the relationship, division of duties, strengths, and skills.

More... Less... Default

Save Close

14. On the Sons/Daughters/Others tab, there are four sections: Minor Son(s) or Daughter(s), Other Minors Residing or Frequently in the Home, Adult Son(s) or Daughter(s), and Adults Residing or Frequently in the Home. Enter text in each of the narrative fields. Click on the [Follow Evaluation Instructions](#) link to open the associated Psychosocial Narration Instructions.

Note: If there are no minor son(s) or daughter(s), other minors residing or frequently in the home, adult son(s) or daughter(s), and /or adults residing or frequently in the home, you will see that there are no narrative fields to complete and text indicating there are none of those individuals in the family/home.

Note: For son(s) or daughter(s) and others residing or frequently in the home that were inserted on the Home Study page (Family tab), the gender is not included. You will need to include the gender of the individual in your description, as it is not included on the Home Study Report template.

Psychosocial Evaluation Report -- Webpage Dialog

eWiSACWIS Print Spell Check Help

Basic

Applicant(s): [Badger, Bucky \(9225066\)](#) [Badger, Momma \(9226818\)](#) [Badger, Grandma \(9226819\)](#) Provider: [Badger, Bucky \(9221596\)](#) ☐ Completed

History Personal Characteristics Marital/Domestic Partner/Civil Union **Sons/Daughters/Others** Extended Family Physical/Social Environment Parenting Adoption/Foster Care

Minor Son(s) or Daughter(s) - Baby Badger

Provide a description of the minor's personality, interests, school, and living situation.

[More...](#) [Less...](#) [Default](#)

[Follow Evaluation Instructions](#)

Is the minor's behavior age-appropriate? Does the minor present any health, developmental, educational or mental health issues? How secure, well-adjusted, and adaptable is the minor? Are his/her needs being well met? Does the minor exhibit any behaviors that pose a threat to the health, safety, and well-being of self or others? Does the minor have a secure attachment to both his/her parents? Does the minor have any alcohol or drug involvement? How prepared is the minor for the arrival of a new child into the family?

[More...](#) [Less...](#) [Default](#)

Minor Son(s) or Daughter(s) - Daughter Badger

Provide a description of the minor's personality, interests, school, and living situation.

[More...](#) [Less...](#) [Default](#)

[Follow Evaluation Instructions](#)

Is the minor's behavior age-appropriate? Does the minor present any health, developmental, educational or mental health issues? How secure, well-adjusted, and adaptable is the minor? Are his/her needs being well met? Does the minor exhibit any behaviors that pose a threat to the health, safety, and well-being of self or others? Does the minor have a secure attachment to both his/her parents? Does the minor have any alcohol or drug involvement? How prepared is the minor for the arrival of a new child into the family?

[More...](#) [Less...](#) [Default](#)

Other Minors Residing or Frequently in the Home

There are no other minors residing or frequently in the home.

Adult Son(s) or Daughter(s) - Son Badger

Provide the marital/domestic partner/civil union status, occupation, circumstances and place of residence of any adult son or daughter. Also indicate

Save Close

15. On the Extended Family tab, enter text in each of the narrative fields for each applicant. Click on the [Follow Evaluation Instructions](#) link to open the associated Psychosocial Narration Instructions.

Psychosocial Evaluation Report -- Webpage Dialog

eWiSACWIS Print Spell Check Help

Basic

Applicant(s): [Badger, Bucky \(9225066\)](#) [Badger, Momma \(9226818\)](#) Provider: [Badger, Bucky \(9221596\)](#)

[Badger, Grandma \(9226819\)](#) ☐ Completed

History	Personal Characteristics	Marital/Domestic Partner/Civil Union	Sons/Daughters/Others	Extended Family	Physical/Social Environment	Parenting	Adoption/Foster Care
---------	--------------------------	--------------------------------------	-----------------------	-----------------	-----------------------------	-----------	----------------------

Extended Family - Bucky Badger

[Follow Evaluation Instructions](#)

Describe if and how the extended family is positive regarding the Applicant's desire to foster or adopt. Has anyone in the extended family had any experience as foster or adoptive parents?

[More...](#) [Less...](#) [Default](#)

Extended Family - Momma Badger

[Follow Evaluation Instructions](#)

[More...](#) [Less...](#) [Default](#)

[Save](#) [Close](#)

16. On the Physical/Social Environment tab, enter text in each of the narrative fields. Click on the [Follow Evaluation Instructions](#) link to open the associated Psychosocial Narration Instructions.

Psychosocial Evaluation Report -- Webpage Dialog

eWiSACWIS Print Spell Check Help

Basic

Applicant(s): [Badger, Bucky \(9225066\)](#) [Badger, Momma \(9226818\)](#) [Badger, Grandma \(9226819\)](#) Provider: [Badger, Bucky \(9221596\)](#) ☐ Completed

History	Personal Characteristics	Marital/Domestic Partner/Civil Union	Sons/Daughters/Others	Extended Family	Physical/Social Environment	Parenting	Adoption/Foster Care
---------	--------------------------	--------------------------------------	-----------------------	-----------------	------------------------------------	-----------	----------------------

Physical/Social Environment

[Follow Evaluation Instructions](#)

[More...](#) [Less...](#) [Default](#)

Finances: Indicate what the family's gross and net monthly income is. Is the income reliable and sufficient to meet the family's needs? Is/Are the Applicant(s) able to budget, organize, and spend money within his/her/their budget? Does/Do the Applicant(s) manage his/her/their debts responsibly and does/do he/she/they live within his/her/their available finances? Are there adequate resources available for emergencies?

[More...](#) [Less...](#) [Default](#)

Safety: Provide the information that your regulations, rules and statutes require pertaining to the residence such as swimming pool/fountains, other water features, guns, trampolines, etc. Please provide the Risk Management Plan if appropriate. Describe all pets and discuss their comfort level with children and if required their vaccinations. Indicate if anyone in the household smokes and if so indicate the designated smoking areas.

[Save](#) [Close](#)

17. On the Parenting tab, enter text in each of the narrative fields. Click on the [Follow Evaluation Instructions](#) link to open the associated Psychosocial Narration Instructions.

Psychosocial Evaluation Report -- Webpage Dialog

eWiSACWIS Print Spell Check Help

Basic

Applicant(s): [Badger, Bucky \(9225066\)](#) [Badger, Momma \(9226818\)](#) [Badger, Grandma \(9226819\)](#) Provider: [Badger, Bucky \(9221596\)](#)

☐ Completed

History	Personal Characteristics	Marital/Domestic Partner/Civil Union	Sons/Daughters/Others	Extended Family	Physical/Social Environment	Parenting	Adoption/Foster Care
---------	--------------------------	--------------------------------------	-----------------------	-----------------	-----------------------------	------------------	----------------------

General Parenting

[Follow Evaluation Instructions](#)

[More...](#) [Less...](#) [Default](#)

How was/were the Applicant(s) disciplined as a child and how does that impact the way he/she/they discipline(s) his/her/their children and/or will discipline any future children? What kind of discipline does/do the Applicant(s) intend to use? Does/Do the Applicant(s) have good knowledge of appropriate and effective forms of discipline?

[More...](#) [Less...](#) [Default](#)

Parental Style: Describe how the Applicant(s) would parent a child with few or no issues.

[More...](#) [Less...](#) [Default](#)

Save Close

18. On the Adoption/Foster Care tab, enter text in each of the narrative fields. Click on the [Follow Evaluation Instructions](#) link to open the associated Psychosocial Narration Instructions.

Psychosocial Evaluation Report -- Webpage Dialog

eWiSACWIS

Print Spell Check Help

Basic

Applicant(s): [Badger, Bucky \(9225066\)](#) [Badger, Momma \(9226818\)](#) [Badger, Grandma \(9226819\)](#) Provider: [Badger, Bucky \(9221596\)](#)

☐ Completed

History Personal Characteristics Marital/Domestic Partner/Civil Union Sons/Daughters/Others Extended Family Physical/Social Environment Parenting Adoption/Foster Care

Adoption/Foster Care

Maintaining Connections with Birth Families: Does/Do the Applicant(s) understand and accept the importance of maintaining birth family connections for a child in foster care and/or adoption? Is/Are he/she/they secure in his/her/their parental role as foster/adoptive parents and ready, willing and able to support contact with birth parents and other significant connections such as siblings, grandparents, and foster parents based on the best interest of the child? Is/Are the Applicant(s) willing to be involved in family interaction, family team meetings, and working as a team member to meet the permanency goal for a child?

More... Less... Default

[Follow Evaluation Instructions](#)

More... Less... Default

Save Close

19. Once you have completed all of the information on each of the tabs, select the Completed checkbox in the top right corner and click Save. If any messages appear, complete the required fields. Once all errors have been fixed, click the Close button to return to the Home Study page.

Note: In order to approve the home study, the Completed checkbox must be selected.

Note: The Completed checkbox may come unchecked throughout the home study process. Since the age of an individual (son, daughter, other residing in the home) determines which section of the Psychosocial Evaluation Report the individual falls into (minor or adult), an evaluation is done anytime there are updates to the Home Provider page, as well as the Family tab of the Home Study page.

20. Once you have completed all of the tabs on the Home Study page, as well as the associated Psychosocial Evaluation Report page, return to the Results tab of the Home Study page. Update any ratings as necessary. Enter narrative in the Psychosocial Evaluation Conclusion and Placement Considerations group boxes.

Note: The Placement Considerations group box will have different directions, based on the Placement Type.

The Recommendation section contains conclusions and considerations based on the home study, a recommendation by you, the home study worker, and the supervisor's approval/denial of that recommendation. Once you have completed the home study, click the [Select Applicant\(s\)](#) link to open the Applicant Selection page.

Home Study - Windows Internet Explorer

eWiSACWIS TM Print Spell Check ABC Help ?

Basic

Applicant(s): [Badger, Bucky \(9225066\)](#) [Badger, Momma \(9226818\)](#) Provider: [Badger, Bucky \(9221596\)](#)
[Badger, Grandma \(9226819\)](#)

Lcns. Type: Lcns. Agency: Certification:

Home Study Type: Home Study Date: Placement Type:

Home Study Status: [View/Update Hold History](#)

Applicant(s) Information **Family** **Medical/School Reports** **Background Information** **Home/Community/Family Lifestyle** **Results**

Psychosocial Evaluation Conclusions

Discuss each of the strengths and concerns you have covered earlier in the home study. Please make a determination how each issue together and separately could or does affect the Applicant's current functioning or ability to parent.

[More...](#) [Less...](#) [Default](#)

Placement Considerations

Discuss each child's or youth's goodness of fit with this family and whether or not the Applicant(s) is/are ready, willing and able to address each of the child's/youth's needs, special considerations and issues as identified on the Compatibility Inventory or by another means.

[More...](#) [Less...](#) [Default](#)

Recommendation

It is recommended that [Select Applicant\(s\)](#) be for

Based on my review of this home study report and the recommendation cited above, the Applicant(s) is/are: for

Options:

100%

On the Applicant Selection page, select the checkbox next the appropriate applicant(s). Then click Continue.

<input type="checkbox"/> Select All	Name	Role	DOB
<input type="checkbox"/>	Badger, Bucky (9225066)	Parent 1	04/12/1970
<input type="checkbox"/>	Badger, Momma (9226818)	Parent 2	10/17/1971
<input type="checkbox"/>	Badger, Grandma (9226819)	Licensee	07/07/1948

Record the recommend approvals or non-approvals for the applicant(s) and for what type of home he/she/they are being recommended for (foster care, adoption or both). Click the Insert button to record additional/different approvals or non-approvals.

It is recommended that [Bucky Badger, Momma Badger and Grandma Badger](#) be for

Based on my review of this home study report and the recommendation cited above, the Applicant(s) is/are:

Home Study was completed by:

Name of Worker:

Title:

Name of Agency:

Agency Address:

Supervisor:

Name of Supervisor:

Title:

This Home study was prepared in accordance with the requirements that apply to foster care and adoption in the State of Wisconsin, I this home study and certify that this is a true and accurate copy.

Select the worker recommendation.

In the “Home Study was completed by” section, verify the information, and update accordingly.

Update the supervisor’s recommendation.

21. When the Home Study is first created, it has a status of Pending. Update the Home Study Status in the Basic group box at the top of the Home Study page.

Basic

Applicant(s): [Badger, Bucky \(9225066\)](#) [Badger, Momma \(9226818\)](#) [Badger, Grandma \(9226819\)](#) Provider: [Badger, Bucky \(9221596\)](#)

Lcns. Type: Lcns. Agency: Certification:

Home Study Type: Home Study Date: Placement Type:

Home Study Status: [View/Update Hold History](#)

22. The Home Study template is accessed from the Home Study page by selecting Home Study Report from the Options drop-down (on any tab of the Home Study page) and clicking the Go button. Information will be pre-fill from the Home Study and Psychosocial Evaluation Report pages onto the template.

Gender: Religion:

Indian Ancestry: Tribe:

Options: [Go](#) [Save](#) [Close](#)

23. To approve the home study, select Approval from the Options drop-down (that can be accessed from any tab on the Home Study page) and click Go. On the Approval History page, select the Approve radio button and click Continue. On the Home Study page, click Save to send the approval to your supervisor.

Note: If validation errors exist, you will have to make the updates and then approve the home study again.

Gender: Religion:

Indian Ancestry: Tribe:

Options: [Go](#) [Save](#) [Close](#)

Placing a Home Study On Hold

You can place a Home Study on hold and remove from hold during the documentation process for the Home Study. When the supervisor approves the Place On Hold request the overall status of the Home Study is set to “On Hold”. The supervisor must then approve the removal from hold and when doing so the status of the Home Study is set back to ‘pending’.

1. The Home Study Hold Status page is accessed from the [View/Update Hold History](#) link.

Home Study - Windows Internet Explorer

eWiSACWIS TM Print Spell Check Help

Basic

Applicant(s): [Badger, Bucky \(9225066\)](#) [Badger, Momma \(9226818\)](#) Provider: [Badger, Bucky \(9221596\)](#)
[Badger, Grandma \(9226819\)](#)

Lcns. Type: Lcns. Agency: Certification:

Home Study Type: Home Study Date: Placement Type:

Home Study Status: [View/Update Hold History](#)

Applicant(s) Information	Family	Medical/ School Reports	Background Information	Home/Community/ Family Lifestyle	Results
Applicant Information					
Applicant 1: Bucky Badger		Applicant 2: Momma Badger			
AKA Name(s):		AKA Name(s): <input type="text" value="Bear, Momma (Maiden Name)"/>			
Date of Birth:	<input type="text" value="04/12/1970"/>	Date of Birth:	<input type="text" value="10/17/1971"/>		
Birthplace:	<input type="text" value="Madison, WI"/>	Birthplace:	<input type="text" value="Milwaukee, WI"/>		
Race(s):	<input type="text" value="Asian"/>	Race(s):	<input type="text" value="White"/>		
Gender:	<input type="text" value="Female"/>	Gender:	<input type="text" value="Female"/>		
Religion:	<input type="text" value="Catholic"/>	Religion:	<input type="text" value="Seventh Day Adventist"/>		
Indian Ancestry:		Indian Ancestry:			
Tribe:		Tribe:			

Options:

100%

2. On the Home Study Hold Status page, click the Insert button. Select on the [Reason\(s\)](#) link. This will open the Home Study Reason(s) Place on Hold page.

The screenshot shows a web browser window titled "Home Study Hold Status -- Webpage Dialog". The header bar is purple with the "eWiSACWIS" logo on the left and "Print", "Spell Check", and "Help" icons on the right. The main content area is titled "Place On/Remove Hold". It contains a table with four columns: "Status", "Effective From", "Reason(s)", and "Worker". The "Status" column has a radio button labeled "Place on Hold". The "Effective From" column contains the date "00/00/0000". The "Reason(s)" column contains a blue hyperlink labeled "Reason(s)". The "Worker" column contains the name "Dan Daisy". Below the table is a "Description:" label followed by a large text input area. At the bottom right of the dialog is an "Insert" button. At the bottom left, there is an "Options:" label, a dropdown menu, and a "Go" button. At the bottom right, there are "Save" and "Close" buttons.

3. There are multiple reasons a Home Study can be placed on hold. On the Home Study Reason(s) Place on Hold page, select one or more reason and click Continue. This will return you to the Home Study Reason Hold Status page.

The screenshot shows a web browser window titled "Home Study Reason(s) Place on Hold -- Webpage Dialog". The header bar is purple with the "eWiSACWIS" logo on the left and "Print", "Spell Check", and "Help" icons on the right. The main content area is titled "Reason(s)". It contains the text "Action: Place on Hold" and a "Reason(s)" label. Below this is a "Select Reason(s)" section with a list of five reasons, each preceded by an unchecked checkbox: "Application not complete", "Change in family circumstances", "Delay in legal process", "Other", and "Support plan in place". At the bottom right of the dialog are "Continue" and "Close" buttons.

4. Enter a date next to the Place on Hold field and enter a description in the Description field, if applicable.
5. Select the Place on Hold radio button. Select Approval from the Options drop-down and click Go. On the Approval History page, select the Approve radio button and click Continue. On the Home Study Hold Status page, click Save to send the approval to your supervisor.

Home Study Hold Status -- Webpage Dialog

eWiSACWIS Print Spell Check ABC Help

Place On/Remove Hold

Status	Effective From	Reason(s)	Worker
<input checked="" type="radio"/> Place on Hold	10/10/2014	Reason(s) Change in family circumstances	Dan Daisy

Description: description here...

Options: **Actions** **Approval** **Go** **Insert** **Save** **Close**

Remove Home Study from Hold

You can place a Home Study on hold and remove from hold during the documentation process for the Home Study. When the supervisor approves the Place On Hold request the overall status of the Home Study is set to “On Hold”. The supervisor must then approve the removal from hold and when doing so the status of the Home Study is set back to ‘pending’.

1. Access the Home Study Hold Status page via the [View/Update Hold History](#) link on the Home Study page.

Home Study - Windows Internet Explorer

eWiSACWIS TM Print Spell Check Help

Basic

Applicant(s): [Badger, Bucky \(9225066\)](#) [Badger, Momma \(9226818\)](#) Provider: [Badger, Bucky \(9221596\)](#)
[Badger, Grandma \(9226819\)](#)

Lcns. Type: Lcns. Agency: Certification:

Home Study Type: Home Study Date: Placement Type:

Home Study Status: [View/Update Hold History](#)

Applicant(s) Information	Family	Medical/ School Reports	Background Information	Home/Community/ Family Lifestyle	Results
Applicant Information					
Applicant 1: Bucky Badger		Applicant 2: Momma Badger			
AKA Name(s):		AKA Name(s): Bear, Momma (Maiden Name)			
Date of Birth:	04/12/1970	Date of Birth:	10/17/1971		
Birthplace:	Madison, WI	Birthplace:	Milwaukee, WI		
Race(s):	Asian	Race(s):	White		
Gender:	Female	Gender:	Female		
Religion:	Catholic	Religion:	Seventh Day Adventist		
Indian Ancestry:		Indian Ancestry:			
Tribe:		Tribe:			

Options:

100%

2. On the Home Study Hold Status page, click the Insert button. Select the [Reason\(s\)](#) link for the Remove from Hold status. This will open the Home Study Reason(s) Remove from Hold page.

Home Study Hold Status -- Webpage Dialog

eWiSACWIS Print Spell Check Help

Place On/Remove Hold

Status	Effective From	Reason(s)	Worker
<input type="radio"/> Place on Hold	10/10/2014	Change in family circumstances	Dan Daisy
Description: <input type="text"/>			
<input type="radio"/> Remove from Hold	00/00/0000	Reason(s)	Dan Daisy
Description: <input type="text"/>			

Options: Go

Insert Save Close

3. On the Home Study Reason(s) Remove from Hold page, select one or more reason and click Continue.

Home Study Reason(s) Remove from Hold -- Webpage Dialog

eWiSACWIS Print Spell Check Help

Reason(s)

Action: Remove from Hold

Reason(s)

Select Reason(s)

- ☐ Application complete
- ☐ Family circumstances resolved
- ☐ Legal process resolved
- ☐ Other
- ☐ Support plan complete
- ☐ Withdrawal from program

Continue Close

4. On the Home Study Hold Status page, select the radio button next to the Remove from Hold status, enter the effective from date, and enter a description, if applicable. Select Approval from the Options drop-down and click Go. On the Approval History page, select the Approve radio button and click Continue. On the Home Study Hold Status page, click Save to send the approval to your supervisor.

Home Study Hold Status -- Webpage Dialog

eWiSACWIS Print Spell Check Help

Place On/Remove Hold

Status	Effective From	Reason(s)	Worker
<input type="radio"/> Place on Hold	10/10/2014	Change in family circumstances	Dan Daisy
Description: description here...			
<input checked="" type="radio"/> Remove from Hold	10/16/2014	Reason(s) Family circumstances resolved	Dan Daisy
Description: description here...			

Options: Actions Approval Go

Insert Save Close